

Habilitation Transfer from the Department of Rehabilitation to the Department of Developmental Services Frequently Asked Questions (FAQs)

Service Provider

- **Will monthly meetings be held until the transfer is complete? Can this be coordinated with Vendor Advisory meetings?**
 - Several regional centers have been holding regular transfer meetings. Check with the local regional center about transfer and vendor advisory meetings.
- **Are there Title 17 requirements for Habilitation vendors?**
 - Yes. Current Title 17 requirements for all vendors and the draft emergency regulations specific to Habilitation vendors are posted on the DDS website.
- **How are the requirements for vendorization different for a Habilitation vendor versus a Day Program vendor?**
 - Many requirements will be the same but there are requirements specific to habilitation services providers.
 - There is a PowerPoint presentation (entitled Vendorization Process) posted on the DDS website (<http://www.dds.ca.gov/>) which describes the requirements for vendorization of Habilitation service providers.
- **What changes can Habilitation service providers anticipate?**
 - Completing and submitting the Individual Habilitation Service Plan (replacing the IHC) to regional center
 - Invoicing regional centers for Habilitation consumers and DOR for VR consumers
 - Participating in referral to and transitions from vocational rehabilitation including submitting placement information and progress reports (that indicate stabilization level) to regional center as well as DOR
 - Complying with Title 17 record maintenance requirements
 - Complying with Regional center audits and quality assurance monitoring
- **Will service providers be required to submit a program design for services provided?**
 - Yes. The draft emergency regulations specific to Habilitation service providers including program design requirements are posted on the DDS website.
 - For existing providers a program design must be submitted and approved by the regional center by June 30, 2005.
 - For new providers (after June 30, 2004) a program design will be required as a condition of vendorization.

- **Who will service providers call or fax requests to when a consumer needs additional supports on the job, after regional center is providing follow along funding?**
 - Contact the consumer's regional center service coordinator.
- **What disappears when the Department of Rehabilitation's habilitation goes away?**
 - Fifteen Habilitation Specialist positions that were available through the Department of Rehabilitation will be changed to 5 Community Program Specialists at DDS who will act as liaisons to the regional centers to effect the transfer.
 - The DOR Facility Technical Support Unit (FTSU) will no longer exist and regional centers will handle Habilitation invoices.
- **Will service providers use the current form/paperwork?**
 - No, however, the forms/paperwork will be as similar as possible.
 - New forms/paperwork are posted on the DDS website.
- **Is the Rehabilitation Accreditation Commission (CARF) still going to be the quality assurance tool for Work Activity Program and Supported Employment Program? Is the regional center going to want to come in and do quality assurance if Rehabilitation Accreditation Commission (CARF) is still in place, duplicating the process?**
 - Rehabilitation Accreditation Commission (CARF) will be a component of quality assurance.
 - Rehabilitation Accreditation Commission (CARF) will be used to inform the regional center of the vendor's performance.
 - Regional centers are required to complete quality reviews of all their providers. Each regional center will determine how to meet this requirement. Regional centers may determine to utilize the CARF process and findings or a portion thereof to meet the quality assurance review requirement.
- **Do Habilitation Programs operating more than one vendored service have to submit more than one signed Medi-Cal Agreement form?**
 - YES. Title 17 currently requires that an applicant for vendorization submit to the vendoring regional center a signed Medi-Cal agreement (Home and Community Based-Services Provider Agreement) with their application for vendorization. As a result, each vendored program or service must have a signed agreement.

New Questions Added May 20, 2004

- **An agency currently supports 3 clients at a large retail store. The ratio is 1:3. The employer will not approve the addition of one more person to bring the ratio to 1:4. Agency opts to request the RC vendorization for an**

integrated work program. Will the money previously paid for supporting these clients come to the RC or does the RC eat these costs?

- The regional centers will be allocated habilitation funding based on the historical usage while DOR managed the services. The regional center will partially recoup the costs for the change to an integrated work program.

▪ **SP - Are there a minimum number of hours of paid work required for WAP or SEPs?**

- Yes, 50% paid work for Work Activity Programs, which is an aggregate requirement. The employer establishes the number of hours worked in supported employment, which is paid work.

▪ **What standards should a provider use to assess eligibility?**

- Each service provider has established, or will establish entrance and exit criteria based upon the services they are able to provide and the specific needs and barriers they have the expertise to address. Acceptance into a program occurs when there is an appropriate match in the consumer's skills, abilities, and needs compared to the services provided by the provider.
- If a service provider is not able to meet a consumer's needs this does not mean the consumer is ineligible for habilitation services.

▪ **Who resolves disputes if there is disagreement about provider's eligibility determination?**

- All service providers have a specified grievance procedure to address disputes about any aspect of their services, including ineligibility determinations.

▪ **What about consumers in part time supported employment in the community who would like to add a day or two at a WAP to earn more money? They cannot do this now. Will they be able to after July 1?**

- Yes, regional centers can authorize the combination of services each consumer needs through the IPP process. Multiple services are allowable.

▪ **If DOR does re-certification every two years and CARF surveys every three years and Title 17 allows RC QA to evaluate programs every 3 years is there any formal scheduling of reviews to ensure on going monitoring?**

- Service providers are required to maintain their CARF accreditation; the schedule is determined by the expiration date of the current accreditation. If a new program is not yet accredited, it must obtain and maintain DOR certification, again the need for renewal is determined by the expiration date. Regional center quality assurance schedules are determined by each regional center based on statutory and regulatory requirements. The routine monthly monitoring of Supported Employment Group size (a minimum of 1 job coach to 4 consumers) and the required provision of 50% paid work (in the aggregate) will be completed by DDS.